

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Association of State Democratic Chairs

ADDRESS (number and street)

430 S. Capitol Street SE

☐Check if different
than previously
reported. (ACC)

Washington

DC

20003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00259481

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☒

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

09

01

2010

through

09

30

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Ann Fishman

Signature of Treasurer

Electronically Filed by Ann Fishman

Date

10

20

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

The Committee has very limited administrative expenses because it contracts for services and does not maintain an office or staff. What administrative costs it does incur are primarily, if not exclusively, for travel and meeting expenses. These limited administrative costs are fully disclosed on its reports.

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 26

Write or Type Committee Name
Association of State Democratic Chairs

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	28771.59
(b) Cash on Hand at Beginning of Reporting Period	34314.78	
(c) Total Receipts (from Line 19)	35200.00	182692.31
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	69514.78	211463.90
7. Total Disbursements (from Line 31)	17090.30	159039.42
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	52424.48	52424.48
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Association of State Democratic Chairs

Report Covering the Period:

From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	200.00	400.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	200.00	400.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	200.00	400.00
12. Transfers From Affiliated/Other Party Committees	35000.00	177541.21
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	4751.10
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	35200.00	182692.31
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	35200.00	182692.31

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	16445.79	155709.07	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	16445.79	155709.07	
22. Transfers to Affiliated/Other Party Committees.....	644.51	3330.35	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	17090.30	159039.42	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17090.30	159039.42	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	200.00	400.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	200.00	400.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16445.79	155709.07
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	4751.10
38. Net Operating Expenditures (subtract Line 37 from Line 36)	16445.79	150957.97

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 26

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

Dollars for Democrats

Mailing Address 430 S Capital St., SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

134400.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	0

Transaction ID: 12-01-02375-04674

Amount of Each Receipt this Period

35000.00

Transfer

SUBTOTAL of Receipts This Page (optional)

35000.00

TOTAL This Period (last page this line number only)

35000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

Sprint PCS

Mailing Address PO Box 62071

City
Baltimore

State
MD

Zip Code
21264-2071

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2002
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02349-04647

Date of Disbursement

09 / 02 / 2010

Amount of Each Disbursement this Period

99.99

B.

Full Name (Last, First, Middle Initial)

Nexus Strategies, Inc

Mailing Address 434 Fayetteville Street
Suite 2020

City
Raleigh

State
NC

Zip Code
27601

Purpose of Disbursement
Consulting Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02351-04649

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Jennie Blackton

Mailing Address 2547 North Buena Vista

City
Burbank

State
CA

Zip Code
91504

Purpose of Disbursement
Political Consultant

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02352-04650

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2099.99

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

Financial Innovations

Mailing Address 100 1st Avenue

City
Cranston

State
RI

Zip Code
02910

Purpose of Disbursement
Lapel Pins

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02353-04651

Date of Disbursement

/ /

Amount of Each Disbursement this Period

934.28

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City
Newark

State
NJ

Zip Code
07101-0114

Purpose of Disbursement
Credit Card Payment - See Memo Items

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-0000

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3293.56

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City
Newark

State
NJ

Zip Code
07101-0114

Purpose of Disbursement
Travel Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04684

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14.99

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

4227.84

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

Airport Taxi Company

Mailing Address PO Box 45453

City
St. Louis

State
MO

Zip Code
63145

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04697

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2010

Amount of Each Disbursement this Period

47.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Ted's Bulletin

Mailing Address 505 8th Street

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04695

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2010

Amount of Each Disbursement this Period

62.95

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Aqua AI 2

Mailing Address 212 Seventh Street, SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04693

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2010

Amount of Each Disbursement this Period

61.70

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

Aqua AI 2

Mailing Address 212 Seventh Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04692

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2010

Amount of Each Disbursement this Period

109.30

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Costco

Mailing Address 999 Lake Drive

City Issaquah State WA Zip Code 98027

Purpose of Disbursement
Stamps

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04691

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2010

Amount of Each Disbursement this Period

43.75

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

James P. Walsh Sedan Services

Mailing Address 1155 Connecticut Avenue, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04690

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2010

Amount of Each Disbursement this Period

115.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

James P. Walsh Sedan Services

Mailing Address 1155 Connecticut Avenue, NW

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02379-04689

Date of Disbursement

/ /

Amount of Each Disbursement this Period

95.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

National Conference of State Legislators

Mailing Address 444 North Capitol Street, NW, Suit

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement
Book

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02379-04688

Date of Disbursement

/ /

Amount of Each Disbursement this Period

107.46

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City
Newark

State
NJ

Zip Code
07101-0114

Purpose of Disbursement
Travel Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02379-04687

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14.99

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

Laclede Cab Co.

Mailing Address 600 S. Vandeventer Avenue

City State Zip Code
St. Louis MO 63110

Purpose of Disbursement

Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04698

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

37.20

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City State Zip Code
Newark NJ 07101-0114

Purpose of Disbursement

Travel Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04685

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

14.99

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Telecharge

Mailing Address 234 West 44th Street

City State Zip Code
New York NY 10036

Purpose of Disbursement

Event Tickets

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04696

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

280.50

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

American Airlines

Mailing Address DFW International Airport

City Dallas State TX Zip Code 75261

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04683

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

323.20

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

American Airlines

Mailing Address DFW International Airport

City Dallas State TX Zip Code 75261

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04682

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

323.20

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

GoDaddy.com

Mailing Address 375 Collins Road NE

City Iowa State IA Zip Code

Purpose of Disbursement
Credit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04681

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

-4.99

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

Hyatt Regency

Mailing Address 71 S. Wacker Dr.

City
Chicago

State
IL

Zip Code
60606

Purpose of Disbursement
Credit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04680

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

-18.62

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Hyatt Regency

Mailing Address 71 S. Wacker Dr.

City
Chicago

State
IL

Zip Code
60606

Purpose of Disbursement
Credit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04679

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

-1.52

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Hyatt Regency

Mailing Address 71 S. Wacker Dr.

City
Chicago

State
IL

Zip Code
60606

Purpose of Disbursement
Credit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04678

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

-0.82

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City
Newark

State
NJ

Zip Code
07101-0114

Purpose of Disbursement
Travel Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04686

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14.99

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JetBlue Airways

Mailing Address 118-92 Queens Blvd

City
Forest Hills

State
NY

Zip Code
11375

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04707

Date of Disbursement

/ /

Amount of Each Disbursement this Period

35.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Montmartre Restaurant

Mailing Address 327 7th Street, SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Meals

Candidate Name
Montmartre Restaurant

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04694

Date of Disbursement

/ /

Amount of Each Disbursement this Period

183.55

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

American Airlines

Mailing Address DFW International Airport

City Dallas State TX Zip Code 75261

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04699

Date of Disbursement

/

Amount of Each Disbursement this Period

259.40

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JetBlue Airways

Mailing Address 118-92 Queens Blvd

City Forest Hills State NY Zip Code 11375

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04708

Date of Disbursement

/

Amount of Each Disbursement this Period

329.20

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

JetBlue Airways

Mailing Address 118-92 Queens Blvd

City Forest Hills State NY Zip Code 11375

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04706

Date of Disbursement

/

Amount of Each Disbursement this Period

35.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

PQ Capitol Hill, Inc.

Mailing Address 666 Pennsylvania Avenue, SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02379-04705

Date of Disbursement

/

Amount of Each Disbursement this Period

56.08

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City
Newark

State
NJ

Zip Code
07101-0114

Purpose of Disbursement
Travel Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02379-04704

Date of Disbursement

/

Amount of Each Disbursement this Period

14.99

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

American Airlines

Mailing Address DFW International Airport

City
Dallas

State
TX

Zip Code
75261

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02379-04703

Date of Disbursement

/

Amount of Each Disbursement this Period

347.20

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City
Newark

State
NJ

Zip Code
07101-0114

Purpose of Disbursement
Travel Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04702

Date of Disbursement

/

Amount of Each Disbursement this Period

14.99

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City
Newark

State
NJ

Zip Code
07101-0114

Purpose of Disbursement
Travel Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04701

Date of Disbursement

/

Amount of Each Disbursement this Period

14.99

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

American Airlines

Mailing Address DFW International Airport

City
Dallas

State
TX

Zip Code
75261

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04700

Date of Disbursement

/

Amount of Each Disbursement this Period

347.20

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City
Newark

State
NJ

Zip Code
07101-0114

Purpose of Disbursement
Travel Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02379-04709

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14.99

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Perkins Coie LLP

Mailing Address 1201 Third Avenue, 40th Floor

City
Seattle

State
WA

Zip Code
98101-3099

Purpose of Disbursement
Legal Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02355-04653

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7800.35

C.

Full Name (Last, First, Middle Initial)

Patton Data Processing

Mailing Address PO Box 11849

City
Lexington

State
KY

Zip Code
40578

Purpose of Disbursement
Compliance Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02360-04656

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)

8100.35

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

Sandler and Reiff, P.C.

Mailing Address 300 M Street SE, Suite 1102

City Washington State DC Zip Code 20003

Purpose of Disbursement
Legal Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02368-04667

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

787.57

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City Newark State NJ Zip Code 07101-0114

Purpose of Disbursement
Credit Card Payment - See Memo Items

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02381-0000

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

1730.05

C.

Full Name (Last, First, Middle Initial)

Marriott

Mailing Address One Marriott Drive

City Washington State DC Zip Code 20058

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02381-04712

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

17.90

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

2517.62

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

Talay Thai

Mailing Address 406 1st St Se

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02381-04721

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

36.59

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Marriott

Mailing Address One Marriott Drive

City
Washington

State
DC

Zip Code
20058

Purpose of Disbursement
Lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02381-04720

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

329.88

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Marriott

Mailing Address One Marriott Drive

City
Washington

State
DC

Zip Code
20058

Purpose of Disbursement
Lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02381-04719

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

329.88

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

Marriott

Mailing Address One Marriott Drive

City
Washington

State
DC

Zip Code
20058

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02381-04718

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

23.50

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Airport Taxi Company

Mailing Address PO Box 45453

City
St. Louis

State
MO

Zip Code
63145

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02381-04717

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

42.10

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Marriott

Mailing Address One Marriott Drive

City
Washington

State
DC

Zip Code
20058

Purpose of Disbursement
Lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02381-04716

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

121.48

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

Wildflowers Restaurant

Mailing Address 1013 Ohio Avenue

City
St. Louis

State
MO

Zip Code
63104

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02381-04715

Date of Disbursement

/ /

Amount of Each Disbursement this Period

252.16

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Marriott

Mailing Address One Marriott Drive

City
Washington

State
DC

Zip Code
20058

Purpose of Disbursement
Lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02381-04713

Date of Disbursement

/ /

Amount of Each Disbursement this Period

329.88

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Landry's Seafood House

Mailing Address 1850 Market Street

City
St. Louis

State
MO

Zip Code
63103

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02381-04711

Date of Disbursement

/ /

Amount of Each Disbursement this Period

151.68

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A. Full Name (Last, First, Middle Initial)
James P. Walsh Sedan Services

Mailing Address 1155 Connecticut Avenue, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02381-04714

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

95.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Sprint PCS

Mailing Address PO Box 62071

City Baltimore State MD Zip Code 21264-2071

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02369-04668

Date of Disbursement

09 / 30 / 2010

Amount of Each Disbursement this Period

99.99

C. Full Name (Last, First, Middle Initial)
Patton Data Processing

Mailing Address PO Box 11849

City Lexington State KY Zip Code 40578

Purpose of Disbursement
Compliance Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-02380-04710

Date of Disbursement

09 / 30 / 2010

Amount of Each Disbursement this Period

-600.00

SUBTOTAL of Disbursements This Page (optional)

-500.01

TOTAL This Period (last page this line number only)

16445.79

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☒ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A. Full Name (Last, First, Middle Initial) Washington State Democratic Party

Mailing Address 615 Second Avenue, Ste. 580

City State Zip Code
Seattle WA 98104

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 22-01-02354-04652

Date of Disbursement

M M / D D / Y Y Y Y
09 / 03 / 2010

Amount of Each Disbursement this Period

129.21

B. Full Name (Last, First, Middle Initial) South Dakota Democratic Party

Mailing Address 309 West 43rd Street, STE 107

City State Zip Code
Sioux Falls SD 57105

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 22-01-02366-04665

Date of Disbursement

M M / D D / Y Y Y Y
09 / 21 / 2010

Amount of Each Disbursement this Period

515.30

SUBTOTAL of Disbursements This Page (optional) ►

644.51

TOTAL This Period (last page this line number only) ►

644.51